



Wisconsin Department of Public Instruction
CHILD AND ADULT CARE FOOD PROGRAM
SITE APPLICATION—CHILD CARE CENTER COMPONENT
PI-1487 (Rev. 05-06)

INSTRUCTIONS:

Centers Administered by a Sponsoring Organization: Complete in duplicate. Return to Sponsoring Organization for submission.

Sponsoring Organizations or independent child care centers: Complete in duplicate. Return with PI-1486, to:

WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION
ATTN.: ELLEN SULLIVAN
COMMUNITY NUTRITION TEAM
P.O. BOX 7841
MADISON, WI 53707-7841

DWD Provider Number

Agreement Number	Site Code Number
1. Name of Center (Site)	2. Telephone Area/No.
3. Address Street, City, State, Zip	

4. Name of Person in Charge of Center (Site)	5. Name of Sponsoring Organization or Institution <i>If different from Center</i>
6. Is site licensed or approved by federal, state, or local authorities? (See instructions for completing the Site Application) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Head Start	7. Tax Status of Site <i>Check One</i> <input type="checkbox"/> Public <input type="checkbox"/> For Profit <input type="checkbox"/> Private, nonprofit

8. Operation Must be within limits stated on day care license or certification.		
A. Hours of Operation From: _____ To: _____	B. Days of Operation <i>Check</i> <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sa	C. Age Range of Enrolled Children From: _____ Through: _____

9. Does site close for periods of one month or more? ☐ No ☐ Yes *If yes, specify dates:*

10. Meal Prep	Meal Prep—Enter “1” for Self-Prep, “2” for Central Kitchen, “3” for School or vendor, “4” for Food Service Management Company. If “3” or “4” is entered, attach copy of completed contract(s).
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11. Type	Type—Enter “C” for Nonprofit and Public Child Care Center, “O” for Outside of School Hours Center, “F” for For Profit Child Care Center, “A” for “At Risk” After School Hours Care Site, “HS” for Head Start Center.
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12. Licensed Capacity	15. Effective Date <i>See Instructions.</i> Indicate the date that this new site began operations or the date that operational changes began. Month _____ Day _____ Year _____	16. Food Service Data Reimbursement may be made only for meals approved by DPI. ¹				
13. License Expiration Date		Requested Meal Services ²	Begin	Time	End	Estimated Average Daily Participation
14. Does site participate in any other USDA food service programs administered by DPI? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>If yes, specify:</i>		<input type="checkbox"/> Breakfast <input type="checkbox"/> AM Snack <input type="checkbox"/> Lunch <input type="checkbox"/> PM Snack <input type="checkbox"/> Supper <input type="checkbox"/> Additional Snack				

17. If more than two meals and one snack **or** two snacks and one meal are listed in item 16, explain (on page 2) the procedures used to ensure that reimbursement is not claimed for more than two meals and one snack **or** two snacks and one meal per day for each child.

18. If the estimated Average Daily Participation (ADP) for any given meal service(s) **exceeds** the licensed capacity of the center (site), provide an explanation (page 2). If conducting “shift” feeding, indicate this on page 2, and list the time of each shift meal service in box #16.

Write your responses to Items 17 and 18 and sign the Certification Statement on Page 2 of this form.

¹ “At-Risk” After School Hours Care Sites may only be approved for a PM Snack and/or an additional snack served on weekends or holidays, including vacation periods (e.g., Spring Break) **during the regular school year only.**

² Federal legislation prohibits reimbursement for more than two meals and one snack **or** one meal and two snacks per child per day. Outside of School Hours Centers may be approved to serve breakfast, snacks and supper to enrolled children when schools are in session. Lunch may be approved during school vacations and holidays provided no more than two meals and one snack **or** one meal and two snacks per child per day are claimed for reimbursement. Outside of School Hours Centers shall be eligible to serve lunches to enrolled children attending schools which do not offer a lunch program. “At-Risk” After School Hours Care Sites may only claim one snack per child per day.

Write your response to Item 17 below.

Write your response to Item 18 below.

CERTIFICATION

I CERTIFY that the information on this form is true and accurate to the best of my knowledge and that reimbursement will be claimed only for approved meals served to enrolled children during the hours they are in attendance at the institution. I understand that the application is being made in connection with the receipt of federal funds. Deliberate misrepresentation of the information may subject the applicant to prosecution under applicable state and federal criminal statutes.

Name of Site Supervisor	Signature ➤	Date Signed
Name and Title of Sponsor's Authorized Representative	Signature ➤	Date Signed

Child Nutrition Programs of the U.S. Department of Agriculture are available to all children regardless of race, color, national origin, age, sex and disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, Washington, DC 20250-9410 or call (800) 725-3272 or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.

DPI USE

	Breakfast	AM Snack	Lunch	PM Snack	Supper	Additional Snack	License Expiration	Effective Date
Original								
Rev 1								
Rev 2								
Rev 3								
Rev 4								
Rev 5								
Rev 6								